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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND

CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/645,191
Filing Date	08/21/03
First Named Inventor	James Landi
Art Unit	3765
Examiner Name	Patel, Tajash
Attorney Docket Number	SC-XOA-102

I hereby revoke all previous powers of attorney given in the above-identified application.							
A Power of Attorney is submitted herewith.							
OR I hereby appoint the practitioners associated with the Customer Number: 000069296.							
	Please change the correspondence address for the above-identified application to:						
✓ The address associated with Customer Number: 000069296							
Firm or Individual Name	Firm or Stephen Chin c/o von Simson & Chin, LLP						
Address							
City	New York	State	State New York Zip 10005				
Country	ÜSA						
Telephone	212-514-8653		Email	smc@vsandc.com			
I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed, (Form PTO/SB/96)							
SIGNATURE of Applicant or Assignee of Record							
Signature							
Name James Landi	i de la companya del companya de la companya del companya de la co				<u> </u>		
Date			lephoni		5 765 7774		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
[2] *Total of 2forms are submitted.							

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file land by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/82 (01-06)
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Please change the correspondence address for the above-identified application to: The address associated with Customer Number: 000069296 OR						
Firm or	Stephen Chin c/o von Simson & Chin, LLF	•				
Address	62 William Street, 6th Floor					
City	New York	State	New Y	ork	Zip	10005
Country	USA					
Telephone	212-514-8653		Email smc@vsandc.com			
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SIGNATURE of Applicant or Assignee of Record						
Signature ///	ilf 17					
Name Michael Lan	di C					
Date 3	Date 3/28/07 Telephone 908 965 - 1244					
NOTE: Signatures of all the idventors of assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
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